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CONFIRMATION NO. 3549

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|--|---|--------------------------------------|---|---|
| SERIAL NUMBER 10/538,303 | FILING OR 371(c) DATE 12/02/2005 RULE | CLASS 607 | GROUP ART UNIT 3700 | ATTORNEY DOCKET NO. GRIHAC P44AUS |
| APPLICANTS Colin Dunlop, New South Wales, AUSTRALIA; ** CONTINUING DATA ***** This application is a 371 of PCT/AU03/01626 12/09/2003 <i>th</i> ** FOREIGN APPLICATIONS ***** AUSTRALIA 2002953185 12/09/2002 <i>th</i> <div style="text-align: right;">** SMALL ENTITY **</div> | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>th</i> Verified and Acknowledged <i>th</i> Examiner's Signature _____ Initials _____ | | STATE OR COUNTRY AUSTRALIA | SHEETS DRAWING 2 | TOTAL CLAIMS 14 |
| INDEPENDENT CLAIMS 3 | | | | |
| ADDRESS 20210 | | | | |
| TITLE Patient warming system | | | | |
| FILING FEE RECEIVED 515 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |